

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA		FOR COURT USE ONLY DUE DATE:	
TRANSCRIPT DESIGNATION AND ORDERING FORM			
1. NAME Fredrick S. Levin	2. PHONE NUMBER (310) 424-3900	3. DATE Jan 30, 2015	
4. FIRM NAME: BuckleySandler LLP	5. E-MAIL ADDRESS: flevin@bucklesandler.com		
6. MAILING ADDRESS 100 Wilshire Boulevard, Suite 1000	7. CITY Santa Monica	8. STATE CA	9. ZIP CODE 90401
10. CASE NUMBER 13-cv-08211-JAK-JCG	11. CASE NAME Desside Holdings Limited v. Megawine, Inc., et al.	12. JUDGE Jay C. Gandhi	
13. APPEAL CASE NUMBER	14. ORDER FOR <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> NON-APPEAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> AUSA <input type="checkbox"/> FPD <input type="checkbox"/> OTHER		

15. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)
Attach additional page for designations if necessary.

HEARING DATE	COURT REPORTER	PROCEEDINGS
Jan 29, 2015	Digital Recording	<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input checked="" type="checkbox"/> (PLEASE SPECIFY): Hearing on Motion to Quash
		<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input type="checkbox"/> (PLEASE SPECIFY):
		<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input type="checkbox"/> (PLEASE SPECIFY):
		<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input type="checkbox"/> (PLEASE SPECIFY):
		<input type="checkbox"/> VOIR <input type="checkbox"/> OPENING <input type="checkbox"/> SETTLEMENT <input type="checkbox"/> CLOSING <input type="checkbox"/> JURY <input type="checkbox"/> DIRE <input type="checkbox"/> STATEMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> ARGUMENTS <input type="checkbox"/> INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL <input type="checkbox"/> OTHER <input type="checkbox"/> PROCEEDINGS <input type="checkbox"/> (PLEASE SPECIFY):

16. ORDER: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.

CATEGORY	ORIGINAL + 1	FORMAT	
	(original to Court, copy to ordering party)	PAPER COPY	PDF FORMAT
ORDINARY	<input type="checkbox"/>	PAPER COPY	<input type="checkbox"/>
14 DAYS	<input type="checkbox"/>	PDF FORMAT	<input checked="" type="checkbox"/>
7 DAYS	<input checked="" type="checkbox"/>	ASCII FORMAT	<input type="checkbox"/>
DAILY	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
HOURLY	<input type="checkbox"/>	FOR ADDITIONAL COPIES, CONTACT COURT REPORTER OR TRANSCRIPTION AGENCY	
REAL TIME	<input type="checkbox"/>		

(CERTIFICATION 17 & 18)

By signing the below, I certify that I will pay all charges
(deposit plus additional)

17 DATE: Jan 30/2015

18. SIGNATURE

FOR ADDITIONAL COPIES, CONTACT COURT REPORTER
OR TRANSCRIPTION AGENCY

19. Transcription agency for digitally recorded proceedings:

20 Month: Day: Year:

The original measurements were made with a 100 mm dial caliper.

NAME OF OFFICIAL:

NAME OF OFFICIAL: _____
Payment of estimated transcript fees were sent on the following date:

Month: Day: Year: